DLN: 93493323004369 OMB No 1545-0047 Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) ▶ Do not enter social security numbers on this form as it may be made public Open to Public Department of the ▶ Go to www.irs.gov/Form990 for instructions and the latest information. Inspection Internal Revenue Service For the 2019 calendar year, or tax year beginning 01-01-2018 , and ending 12-31-2018 D Employer identification number B Check if applicable International Olympic Committee ☐ Address change 98-0123241 ☐ Name change % EMRE KURTOGLU Doing business as ☐ Initial return ☐ Final return/terminate E Telephone number ☐ Amended return Number and street (or P O box if mail is not delivered to street address) Room/suite □ Application pending City or town, state or province, country, and ZIP or foreign postal code 1007, Lausanne $\,$ **G** Gross receipts \$ 2,380,080,363 Name and address of principal officer H(a) Is this a group return for CHRISTOPHE DE KEPPER □Yes ☑No subordinates? PO Box 351 H(b) Are all subordinates 1007, Lausanne ☐ Yes ☐No included? If "No," attach a list (see instructions) Tax-exempt status 501(c)(3) **✓** 501(c) (4) **◄** (insert no) 4947(a)(1) or 527 **H(c)** Group exemption number ▶ Website: ► https://www.olympic.org/the-ioc L Year of formation 1894 M State of legal domicile SZ K Form of organization ☐ Corporation ☐ Trust ☑ Association ☐ Other ▶ Summary 1 Briefly describe the organization's mission or most significant activities TO PROMOTE OLYMPISM THROUGHOUT THE WORLD AND LEAD THE OLYMPIC MOVEMENT IN ACCORDANCE WITH THE OLYMPIC CHARTER Activities & Governance Check this box $\blacktriangleright \sqcup$ if the organization discontinued its operations or disposed of more than 25% of its net assets Number of voting members of the governing body (Part VI, line 1a) . . . 15 Number of independent voting members of the governing body (Part VI, line 1b) 4 372 5 Total number of individuals employed in calendar year 2018 (Part V, line 2a) Total number of volunteers (estimate if necessary) . . . 7a Total unrelated business revenue from Part VIII, column (C), line 12 7a 29,450,000 7b b Net unrelated business taxable income from Form 990-T, line 34 **Prior Year Current Year** 8 Contributions and grants (Part VIII, line 1h) . 9 Program service revenue (Part VIII, line 2g) . 514,340,000 2,043,662,951 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) . . 137,905,000 63,853,806 9,065,000 272,563,606 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 661,310,000 2,380,080,363 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) Grants and similar amounts paid (Part IX, column (A), lines 1-3). 478,110,000 1,320,870,327 14 Benefits paid to or for members (Part IX, column (A), line 4) . Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 118,328,000 77,856,020 Expenses 16a Professional fundraising fees (Part IX, column (A), line 11e) . **b** Total fundraising expenses (Part IX, column (D), line 25) ▶0 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) . 182,039,000 596,690,304 778,477,000 1,995,416,651 18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) 384,663,712 19 Revenue less expenses Subtract line 18 from line 12 . -117,167,000 Net Assets or Fund Balances **Beginning of Current Year End of Year** 20 Total assets (Part X, line 16) . 3,902,376,000 3,044,664,657 1,626,781,574 21 Total liabilities (Part X, line 26) . 1,890,216,000 1,417,883,083 22 Net assets or fund balances Subtract line 21 from line 20 . Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge 2019-11-19 Signature of officer Sign Here CHRISTOPHE DE KEPPER DIRECTOR GENERAL Type or print name and title Date Print/Type preparer's name Preparer's signature PTIN Check | If P01072545 Paid self-employed Fırm's EIN ▶ Firm's name FRNST & YOUNG US LLF Preparer Use Only Firm's address ► 155 N Wacker Drive Phone no (312) 879-2000 Chicago, IL 60606 ☑ Yes ☐ No May the IRS discuss this return with the preparer shown above? (see instructions) . For Paperwork Reduction Act Notice, see the separate instructions. Form 990 (2018) Cat No 11282Y

Form	990 (2018)					Page 2						
Pa	statement	of Program Servi	ce Accomplis	hments								
	Check If Sche	dule O contains a resp	onse or note to	any line in this Part III		🗹						
1	Briefly describe the o	organization's mission		·								
	IOC'S MISSION IS TO TO LEAD THE OLYMPION				NG THE REGULAR CELEBRATION	OF THE OLYMPIC GAMES						
2	Did the organization	undertake any signific	ant program ser	vices during the year w	hich were not listed on							
	the prior Form 990 o	🗹 Yes 🗌 No										
	If "Yes," describe the	ese new services on Sc	hedule O									
3	Did the organization	cease conducting, or r	make significant	changes in how it cond	ucts, any program							
	services?											
	If "Yes," describe the	ese changes on Schedu	ıle O									
4	Section $501(c)(3)$ an		ions are required	to report the amount of	largest program services, as m of grants and allocations to othe							
	(Code) (Expenses \$	680,865,972	including grants of \$	158,264,536) (Revenue \$	1,435,803,150)						
	See Additional Data											
4b	(Code) (Expenses \$	430,339,768	including grants of \$	412,350,432) (Revenue \$	607,859,801)						
	See Additional Data											
4c	(Code) (Expenses \$	798,674,282	ıncludıng grants of \$	750,255,359) (Revenue \$)						
	See Additional Data											
4d	Other program servi	ces (Describe in Sched	lule O)									
	(Expenses \$	inc	luding grants of	\$) (Revenue \$)						
4e	Total program serv	vice expenses ▶	1,909,880,0	22								

Form	990 (2018)			Page 3
Pa	rt IV Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1		No
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		No
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		
5	Is the organization a section $501(c)(4)$, $501(c)(5)$, or $501(c)(6)$ organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I "	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 🕏	10		No
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10?			

,	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 🛂	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services?If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		No
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16° If "Yes," complete Schedule D, Part VII 🕏	11b	·	No

No

Nο

Nο

Nο

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Nο

Nο

Nο

Νo

Nο

Nο

Form **990** (2018)

11c

11d

11e

11f

12a

12b

13

14a

14b

15

16

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20a

20b

21

Yes

٠

Yes

Yes

Yes

c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its

Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 🕏

Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses

the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 🥦

If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 🕏

Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to

Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,

Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII,

Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"

Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic

Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments

valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any

total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 🕏 Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported

b Was the organization included in consolidated, independent audited financial statements for the tax year?

14a Did the organization maintain an office, employees, or agents outside of the United States?

column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I(see instructions)

20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H

b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

column (A), line 2? If "Yes," complete Schedule I, Parts I and III

government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX,

Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E

12a Did the organization obtain separate, independent audited financial statements for the tax year?

foreign organization? If "Yes," complete Schedule F, Parts II and IV

or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV . . .

15

16

19

21

Par	Checklist of Required Schedules (continued)			
			Yes	No
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K If "No," go to line 25a	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L,			
	Part IV	28a		No
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Yes	
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	Yes	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 197 Note. All Form 990 filers are required to complete Schedule O	38	Yes	
Pa	Statements Regarding Other IRS Filings and Tax Compliance			

b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? . . . 9h Section 501(c)(7) organizations. Enter

a Initiation fees and capital contributions included on Part VIII, line 12 . . 10a b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b 11 Section 501(c)(12) organizations. Enter a Gross income from members or shareholders . 11a **b** Gross income from other sources (Do not net amounts due or paid to other sources 11b

12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a b If "Yes," enter the amount of tax-exempt interest received or accrued during the year

12b

Section 501(c)(29) qualified nonprofit health insurance issuers.

a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O 13a Enter the amount of reserves the organization is required to maintain by the states in 13b which the organization is licensed to issue qualified health plans

13c

14a

14b

15

Yes

Form 990 (2018)

No

c Enter the amount of reserves on hand

14a Did the organization receive any payments for indoor tanning services during the tax year?

b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.

Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess

parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N.

Is the organization an educational institution subject to the section 4968 excise tax on net investment income?

01111	J J O (2				raye		
Par	t VI	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O See instructions Check if Schedule O contains a response or note to any line in this Part VI	" respo	onse to	lınes 🗹		
Se	ction	A. Governing Body and Management					
				Yes	No		
1a	Enter	the number of voting members of the governing body at the end of the tax year 15					
	If the	re are material differences in voting rights among members of the governing					
	body,	or if the governing body delegated broad authority to an executive committee or					
		ar committee, explain in Schedule O					
b	Enter	the number of voting members included in line 1a, above, who are independent 1b 15					
2	Did ai	ny officer, director, trustee, or key employee have a family relationship or a business relationship with any other					
-		r, director, trustee, or key employee?	2		No		
3		ne organization delegate control over management duties customarily performed by or under the direct supervision icers, directors or trustees, or key employees to a management company or other person?	3		No		
4	Did th	ne organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No		
5	5 Did the organization become aware during the year of a significant diversion of the organization's assets?						
6	Did th	ne organization have members or stockholders?	6	Yes			
7a	Did th	ne organization have members, stockholders, or other persons who had the power to elect or appoint one or more					
		bers of the governing body?	7a	Yes			
b		ny governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or ns other than the governing body?	7b	Yes			
8		ne organization contemporaneously document the meetings held or written actions undertaken during the year by					
_		ollowing	.	V			
a	_	overning body?	8a 8b	Yes Yes			
D		committee with authority to act on behalf of the governing body?	80	res			
9		ization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No		
Se	ction	B. Policies (This Section B requests information about policies not required by the Internal Revenue	e Code	e.)			
				Yes	No		
10a	Did th	ne organization have local chapters, branches, or affiliates?	10a	Yes			
b	If "Ye and b	10b	Yes				
11a		he organization provided a complete copy of this Form 990 to all members of its governing body before filing the			NI -		
L		ribe in Schedule O the process, if any, used by the organization to review this Form 990	11a		No		
			12-	V			
		ne organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes			
	confli	officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to cts?	12b	Yes			
С		ne organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in dule O how this was done	12c	Yes			
13	Did th	ne organization have a written whistleblower policy?	13	Yes			
14		ne organization have a written document retention and destruction policy?	14	Yes			
15	Did the perso	ne process for determining compensation of the following persons include a review and approval by independent ins, comparability data, and contemporaneous substantiation of the deliberation and decision?					
а	The o	rganization's CEO, Executive Director, or top management official	15a	Yes			
b	Other	officers or key employees of the organization	15b	Yes			
	If "Ye	s" to line 15a or 15b, describe the process in Schedule O (see instructions)					
16a		ne organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a ile entity during the year?	16a		No		
b		s," did the organization follow a written policy or procedure requiring the organization to evaluate its participation					
		nt venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt s with respect to such arrangements?	16b				
Se	ction	C. Disclosure					
17	Lıst th	ne States with which a copy of this Form 990 is required to be filed▶					
18		on 6104 requires an organization to make its Form 1023 (or 1024-A if applicable), 990, and 990-T (501(c)(3)s available for public inspection Indicate how you made these available Check all that apply					
		Own website 🔲 Another's website 🗹 Upon request 🔲 Other (explain in Schedule O)					
19		ribe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest , and financial statements available to the public during the tax year					
20		the name, address, and telephone number of the person who possesses the organization's books and records RE KURTOGLU Chteau de Vidy PO Box 351 , 1007, Lausanne SZ					

compensated employees, and former such persons

Page 7

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the
- organization and any related organizations

 List all of the organization's **former** officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

organization, more than \$10,000 of reportable compensation from the organization and any related organizations List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest

List all of the organization's former officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
 List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the

(C) (A) (B) (D) (F) (E) Name and Title Average Position (do not check more Reportable Reportable Estimated hours per than one box, unless person compensation compensation amount of other week (list is both an officer and a from the from related compensation organization (Wanv hours director/trustee) organizations from the for related 2/1099-MISC) (W- 2/1099organization and Highest co Individual trustee or director Former organizations related MISC) Institutional Trustee below dotted employee organizations line) compensated See Additional Data Table

W12 7FR UK

SZ

LAUSANNE, 0 1005

Tradamarca Humphrey and Co, AVENUE DU TRIBUNAL-FDRAL 34

compensation from the organization ▶ 334

Name and Title

(B)

Average

Estimated

Page **8**

		week (list is both an officer and a any hours director/trustee)								compensation compensation from the ganization (W-1/1099-MISC) compensation compensation from related organizations (V-1/1099-MISC)			compensation V- from the		
		organizations below dotted line)	individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	2/1099	-M15C)	2/ 1099-M15(~) 	relat relat organiz	:ed	
See	Additional Data Table														
1b 9	Gub-Total						<u> </u>								
	Total from continuation sheets to P Total (add lines 1b and 1c)	•					>		6.4	54,993		0		1,069,986	
2	Total number of individuals (including of reportable compensation from the	but not limited	to thos					rec	· · · · · · · · · · · · · · · · · · ·		100,000			, , ,	
													Yes	No	
3	Did the organization list any former line 1a? <i>If "Yes," complete Schedule</i> .											3	ļ	No	
4	For any individual listed on line 1a, is organization and related organization individual	s greater than \$	150,00	0? <i>If</i>	"Yes	," c					m the	4	· Yes		
5	Did any person listed on line 1a recei services rendered to the organization	ve or accrue cor	mpensal	tion fi	rom										
Se	ection B. Independent Contract											5		No	
1	Complete this table for your five high from the organization Report compe	est compensate										mpe	nsation		
	·	(A) and business addre									(B) scription of services		Compe		
27 FA W:	ce Global Limited, RM STREET IJ SRJ								C	Consultanc				7,779,526	
PO BO DUBA	xperience by Richard Attias FZ, XX 283516 I, 0								C	Consultanc	:y		6	5,350,590	
10	u Inc, HIGASHI-SHIMBASHI 5-7001								C	Consultano	cy		2	,512,500	
1ST F	n International Media Ltd, LOOR 2 TELEVISION CENTRE 12 7FR								C	Consultanc	су			,198,550	

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of

(C)

Position (do not check more

(D)

Reportable

Consultancy

(E)

Reportable

3,071,879

Part	VIII Statement of	Revenue									rage 3
	Check if Schedul	le O contains a	respon	se or note to any	line in this F	art VIII					🗆
					(A) Total reve	nue	Rela ex fur	(B) ated or empt action	Un bu	(C) related usiness evenue	(D) Revenue excluded from ax under sections 512 - 514
	1a Federated campaig	ns	1a				iev	renue			312 - 314
nts ints	b Membership dues	_	1b								
3ra nou	c Fundraising events	Ļ	1c								
Š, (d Related organizatio	_	1d								
Giffs, Grants ilar Amounts	e Government grants (co	L	1e								
ıs,	f All other contributions	` <u>L</u>	1								
tio S. S.	and similar amounts n		1f								
Contributions, Gifts, Grants and Other Similar Amounts	g Noncash contribution in lines 1a - 1f \$										
<u>ہ ت</u>	h Total. Add lines 1a	-1f	• •	•		0					
<u>a.</u>				Business	Code	1 425 0	02.150	1 425 00	2.150		
Revenue	2a TELEVISION BROADCAS				533110	1,435,80		1,435,80	· ·	20.450.0	.00
ď	b TOP PROGRAMME MARK	KETING RIGHTS			533110	607,8	59,801	578,40	9,801	29,450,0	000
A)	с ———		_								
Ser	d		-								
an	е		-								
Program Service	f All other program se	rvice revenue		3.043.6							
₫.	9 Total. Add lines 2a-2	2f	. •	2,043,6	562,951						
	3 Investment income (i	-		terest, and other	63	3,853,806					63,853,806
	similar amounts) . 4 Income from investments	ent of tay-even		nd proceeds		0					
				>		0					
		(ı) Real		(II) Personal							
	6a Gross rents				1						
	L Loca rental evaces		_		4						
	b Less rental expenses										
	c Rental income or		0	C	5						
	(loss)				_	0					
	d Net rental income o	(i) Securitie		· · ▶	1						
	7a Gross amount	(i) Securities	-	(II) Other	1						
	from sales of assets other										
	than inventory										
	b Less cost or other basis and]						
	sales expenses				4						
	C Gain or (loss)d Net gain or (loss)				4	0					
	8a Gross income from f		_	<u> </u>	1						
e F	(not including \$	0									
æ	contributions reporte See Part IV, line 18		a	0							
Rev	b Less direct expense	s	ь	0	=						
erl	c Net income or (loss)	from fundraisii	ng ever	nts >	_	0					
Other Revenue	9a Gross income from g See Part IV, line 19		s								
•	See Part IV, lille 19		a	0							
	b Less direct expense	s	ь	0	†						
	c Net income or (loss)	from gaming a	ıctıvıtıe	s Þ	_	0					
	10aGross sales of invent returns and allowand										
	returns and allowand	les	a	0							
	b Less cost of goods s	sold	ь	0	1						
	C Net income or (loss)		∟ nventoi	ry >	_	0					
	Miscellaneous			Business Code							
	11aOCOG MARKETING	PROGRAMME		533110	235	5,513,731		235,513,731			
	b OTHER RIGHTS (SU	PPLIERSHIP &		533110	37	7,049,875		37,049,875			
	LICENSING)								L		
	с										
	d All other revenue .										
	e Total. Add lines 11a	-11d			272	2,563,606					
	12 Total revenue. See	Instructions				0,080,363		2,286,776,557		29,450,000	63,853,806
				-	2,380	,,000,363	<u> </u>	±,∠00,//0,55/		29,450,000	63,853,806 Form 990 (2018)

Part IX	Statement of Functional Expenses	j
C t	(-)(3) I FO1(-)(4)	

For	m 990 (2018)				Page 10
_	art IX Statement of Functional Expenses tion 501(c)(3) and 501(c)(4) organizations must complete all co	-	·		<u>_</u>
	Check if Schedule O contains a response or note to any	line in this Part IX .			<u> </u>
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraisingexpenses
1	Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	212,976,560	212,976,560		
2	Grants and other assistance to domestic individuals See Part IV, line 22	0			
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, line 15 and 16	1,107,893,767	1,107,893,767		
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors, trustees, and key employees	9,133,000	4,427,688	4,705,312	
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$	0			
7	Other salaries and wages	63,299,838	30,687,829	32,612,009	
	Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	5,423,182	2,629,164	2,794,018	
9	Other employee benefits	0			
10	Payroll taxes	0			
11	Fees for services (non-employees)				
	a Management	0			
	b Legal	0			
	c Accounting	0			
	d Lobbying	0			
	e Professional fundraising services See Part IV, line 17	0			
		1,864,515		1,864,515	
	f Investment management fees		10 410 221	1,804,313	
	g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	18,418,331	18,418,331		
	Advertising and promotion	5,539,836	5,539,836		
13	Office expenses	0			
14	Information technology	0			
15	Royalties	0			
16	Occupancy	0			
17	Travel	7,233,768	7,233,768		
18	Payments of travel or entertainment expenses for any federal, state, or local public officials •	0			
19	Conferences, conventions, and meetings	12,854,325	12,854,325		
20	Interest	0			
21	Payments to affiliates	0			
	Depreciation, depletion, and amortization	10,333,220	10,333,220		
	Insurance	0	, ,		
	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
	a GENERAL RUNNING EXPENSES	43,560,775		43,560,775	
	b OLYMPIC GAMES EXPENSES	289,179,767	289,179,767		
	c YOUTH OLYMPIC GAMES EXPENSES	65,848,048	65,848,048		
	d PROMOTION OF OLYMPICS	121,883,008	121,883,008		
	e All other expenses	19,974,711	19,974,711		
25	Total functional expenses. Add lines 1 through 24e	1,995,416,651	1,909,880,022	85,536,629	0
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				
	Check here ► ☐ If following SOP 98-2 (ASC 958-720)				

Page **11**

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112,149,245

1.626.781.574

350.005.448

1,067,877,635

1,417,883,083

3,044,664,657

Form **990** (2018)

3.044.664.657

1.147.692.214

366,940,115

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0 20 0

0

3.902.376.000

256,386,000

55.841.000

73,814,000

1.504.175.000

1.890.216.000

1.471.281.000

507,599,000

33,280,000

2,012,160,000

3,902,376,000

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Form 990 (2018)

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18 19

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34

Liabilities 22

Fund Balances

Assets or 30

Net

Intangible assets . . .

Grants payable . .

Deferred revenue .

Other assets See Part IV, line 11 .

Accounts payable and accrued expenses

Tax-exempt bond liabilities . . .

persons Complete Part II of Schedule L .

Complete Part X of Schedule D

Temporarily restricted net assets

Permanently restricted net assets

Total net assets or fund balances

Unrestricted net assets

and other liabilities not included on lines 17 - 24)

Capital stock or trust principal, or current funds

Total liabilities and net assets/fund balances

complete lines 27 through 29, and lines 33 and 34.

Organizations that do not follow SFAS 117 (ASC 958), check here \triangleright \square and complete lines 30 through 34.

Paid-in or capital surplus, or land, building or equipment fund .

Retained earnings, endowment, accumulated income, or other funds

Total liabilities. Add lines 17 through 25 .

Total assets. Add lines 1 through 15 (must equal line 34) .

Escrow or custodial account liability Complete Part IV of Schedule D

key employees, highest compensated employees, and disqualified

Secured mortgages and notes payable to unrelated third parties

Unsecured notes and loans payable to unrelated third parties

Loans and other payables to current and former officers, directors, trustees,

Other liabilities (including federal income tax, payables to related third parties,

Organizations that follow SFAS 117 (ASC 958), check here 🕨 🗹 and

		Beginning of year		End of year
1	Cash-non-interest-bearing	758,179,000	1	687,805,261
2	Savings and temporary cash investments	0	2	252,300,000
3	Pledges and grants receivable, net	0	3	0
4	Accounts receivable, net	0	4	99,016,349
5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L.	0	5	0
6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete	720,726,000	6	0

	6	Loans and other receivables from other disquali section 4958(f)(1)), persons described in sectio contributing employers and sponsoring organiza- voluntary employees' beneficiary organizations Part II of Schedule L.	rsons (as defined under (c)(3)(B), and f section 501(c)(9)	720,726,000	6	0	
Assets	7	Notes and loans receivable, net			0	7	0
SS	8	Inventories for sale or use	0	8	0		
۹	9	Prepaid expenses and deferred charges		0	9	98,715,773	
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a	150,514,548			
	b	Less accumulated depreciation	10 b	14,076,040	292,039,000	10 c	136,438,508
	11	Investments—publicly traded securities .		2,122,048,000	11	1,727,259,288	
	12	Investments—other securities See Part IV, line	9,384,000	12	0		
	13	Investments—program-related See Part IV, line	0	13	43,129,478		

If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O

3a

3b

Nο

Form 990 (2018)

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required

audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

Audit Act and OMB Circular A-133?

Additional Data

Software ID:

Olympic Games revenue distribution In 2018, the IOC provided direct financial support to the PyeongChang 2018 Organising Committee, the Tokyo 2020 Organising Committee, the United States Olympic and Paralympic Committee, the National Olympic Committees, and the International Sports Federations through the distribution of

Software Version:

Name: International Olympic Committee

EIN: 98-0123241

Form 990, Part III, Line 4a:

Olympic Games revenues, which includes broadcasting rights

Form 990 (2018)

Form 990, Part III, Line 4b:

Olympic and Paralympic Committee)

Olympic Marketing Programme TOP Revenue Distribution In 2018, the TOP Revenue Distribution contributed to the success of the Olympic Winter Games PyeonaChang 2018 The TOP Revenue Distribution also gave valuable support to the Tokyo 2020 Organising Committee and the National Olympic Committees (including the United States

Olympic Solidarity Programme Olympic Solidarity is responsible for administering and managing the share of the Olympic broadcasting rights for all recognised National Olympic Committees (NOCs) by the IOC Olympic Solidarity redistributes these funds through diverse programmes according to the needs of the NOCs and Continental

Associations These include - World Programmes, prioritising athletes, coaches, NOC management and the promotion of the Olympic values - Continental Programmes, meeting the specific needs of each continent, - IOC Subsidies for Participation in Olympic Games, offering financial support to NOCs before, during and after the Games

Form 990, Part III, Line 4c:

(A) (D) (B) (C) (E) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average than one box, unless amount of other hours per compensation compensation person is both an officer week (list from the from related compensation and a director/trustee) any hours organization organizations from the

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

	 							(147 2/1000	(14/ 2/1000	
	for related organizations below dotted line)		Institutional Trustee	Officer	key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
Thomas BACH IOC President	41 0	×		×				0	0	0
Anita L DEFRANTZ V P of IOC EXECUTIVE BOARD	1 0	x		×				0	0	0
Ugur Erdener V P of IOC EXECUTIVE BOARD	1 0	x		x				0	0	0
Juan Antonio Samaranch Salisachs V P of IOC EXECUTIVE BOARD	1 0	×		×				0	0	0
Zaiqing Yu	1 0									

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V P of IOC EXECUTIVE BOARD	0 0			
Juan Antonio Samaranch Salisachs	1 0			
		l X)
V P of IOC EXECUTIVE BOARD	0 0			
Zaiging Yu	1 0			
		X		×

and Independent Contractors

V P of IOC EXECUTIVE BOARD

IOC EXECUTIVE BOARD MEMBER

...... IOC EXECUTIVE BOARD MEMBER

IOC EXECUTIVE BOARD MEMBER

IOC EXECUTIVE BOARD MEMBER

IOC EXECUTIVE BOARD MEMBER

Nicole Lucia Maria Hoevertsz

Gian Franco Kasper

Sergey BUBKA

Kirsty Coventry

Ivo Ferriani

(A) (D) (E) (B) (C) (F) Name and Title Average Position (do not check more Reportable Reportable Estimated than one box, unless compensation amount of other hours per compensation person is both an officer week (list from the compensation from related any hours and a director/trustee) organization organizations from the

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

	formulated	u nalakad					(N. 3/1000	(W 2/1000		
	for related organizations below dotted line)		Institutional Trustee	10	key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
Gunilla Lindberg	1 0	×						0	0	0
IOC EXECUTIVE BOARD MEMBER	0 0									
Willy Kaltschmitt Lujn IOC EXECUTIVE BOARD MEMBER	1 0	х						0	0	0
Nenad Lalovic IOC EXECUTIVE BOARD MEMBER	1 0	Х						0	0	0
Robin Everett Mitchell TOC EXECUTIVE BOARD MEMBER	1 0							0	0	0

Nenad Lalovic	1 0	×			
IOC EXECUTIVE BOARD MEMBER	0 0	,,			
Robin Everett Mitchell	1 0	×			
IOC EXECUTIVE BOARD MEMBER	0 0	^			
Ser Miang Ng	1 0	×			

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1,126,955

570,427

703,322

0

133,959

94,669

100,792

0

and Independent Contractors

IOC EXECUTIVE BOARD MEMBER

IOC EXECUTIVE BOARD MEMBER

...... IOC EXECUTIVE BOARD MEMBER

Denis Andr Oswald

Angela Ruggiero

Director General

Lana Haddad

Pere Mır

Christophe De Kepper

Chief Finance Officer

Deputy Director General ROM

(A) (B) (C) (D) (E) (F) Name and Title Average Position (do not check more Reportable Reportable Estimated than one box, unless amount of other hours per compensation compensation week (list person is both an officer from the from related compensation

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

and Independent Contractors

DIRECTOR MEDICAL & SCIENTIFIC

CHIEF ETHICS & COMPLIANCE OFF

Howard Stupp

MARIE SALLOIS

Director CoBraS

Special Legal Advisor

Pquerette Gırard-Zappellı

	any hours	and	a dır	ecto		ustee)	organization	organizations	from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
Christophe Dubi OLYMPIC GAMES EXEC DIRECTOR	41 0			х				677,431	0	102,384
James MacLeod NOC and OS Director	41 0				x			341,021	0	54,149
Kıt McConnell Sports Director	41 0				×			434,337	0	83,341
Gerry Pennell CHIEF INFORMATION TECH OFFICER	41 0				×			439,430	0	88,244
Mark Adams	41 0					х		467,086	0	89,404

440,187

435,931

416,707

402,159

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84,246

86,053

75,898

76,847

Sports Director	0 0		,		13 1,337	
Gerry Pennell	41 0		х		439,430	
CHIEF INFORMATION TECH OFFICER	0 0		۲		153,150	
Mark Adams	41 0			,	467.096	
Spokesman Services Director	0 0			, x	467,086	

0.0 41 0

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				X			439,430	0	l
CHIEF INFORMATION TECH OFFICER	0 0								
Mark Adams	41 0								
		l			х		467,086	l 0!	i
Spokesman Services Director	0 0								l
Richard Budgett	41 0								

efile GRAPHIC print - DO NOT PROCESS As Filed Data -SCHEDULE D

Supplemental Financial Statements

► Complete if the organization answered "Yes," on Form 990,

OMB No 1545-0047

DLN: 93493323004369

Open to Public

Department of the Treasury Internal Revenue Service

(Form 990)

Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ▶ Attach to Form 990.

▶ Go to www.irs.gov/Form990 for the latest information. Inspection Name of the organization **Employer identification number** International Olympic Committee 98-0123241 Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year 2 Aggregate value of contributions to (during year) Aggregate value of grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? 🗌 Yes 🗌 No Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7 Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Year Total number of conservation easements Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) 2c Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year 🕨 Number of states where property subject to conservation easement is located ▶ 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(II)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

Revenue included on Form 990, Part VIII, line 1

Assets included in Form 990, Part X

Cat No 52283D

Par	t IIII	Organizations Ma	aintaining Col	lections o	of Art, H	istori	cal T	reasu	ires, o	r Other	Similar A	ssets (co	ntınued)	
3		the organization's acq (check all that apply)	uisition, accessioi	n, and other	r records,	check	any of	the fo	llowing t	that are a	significant i	use of its o	collection	
а		Public exhibition				d		Loan	or exch	ange prog	grams			
b		Scholarly research				e		Othe	r					
c		Preservation for future	e generations											
4		e a description of the		lections and	d explain h	ow the	ey furtl	her the	e organiz	zation's e	xempt purpo	ose in		
5		g the year, did the orga to be sold to raise fur									nılar	☐ Yes	□ r	No
Pai	rt IV	Escrow and Cust Complete if the ord X, line 21.			" on Forr	n 990	, Part	IV, lı	ne 9, o	r reporte	ed an amou	unt on Fo	rm 990,	, Part
1a		organization an agent ed on Form 990, Part I		an or other	ıntermedi	ary for	contri	bution	s or oth	er assets	not	☐ Yes	□ r	No
b	If "Yes	s," explain the arrange	ement in Part XIII	and comple	ete the fol	lowing	table				Δ	mount		_
c		ning balance	inche in ruie XIII	and comple	ete the for	iomig	tabic			1c				
d	-	ons during the year								1d				_
e		outions during the year	r							1e				_
f	Ending	g balance								1f				_
2a	Dıd th	e organization include	an amount on Fo	orm 990, Par	rt X, line 2	21, for	escrov	v or cu	stodial a	account li	ability?	☐ Yes	□ r	No
b		s," explain the arrange												
Pa	rt V	Endowment Fund	ds. Complete ıf										1-	
1a	Beamni	ng of year balance .		(a)Currer	nt year	(D)P	rior yea	r	(c) I wo y	ears back	(d)Three ye	ars back (e) Four yea	ars back
	-	utions						\dashv						
		estment earnings, gair	ns. and losses					-						
		or scholarships	•					_						
		xpenditures for facilities						_						
		grams												
f	Adminis	strative expenses .												
g	End of y	year balance												
2 a		e the estimated perce designated or quasi-e	-	ent year enc	d balance ((line 1	g, colu	mn (a))) held a	as				
b	Perma	nent endowment 🕨												
С		orarily restricted endov			00/									
За	•	ercentages on lines 2a ere endowment funds		•		on that	t are h	old an	d admin	ustered fo	r the			
Ja		zation by	not in the posses	sion or the	organizaci	on tha	c are n	eiu air	u aumm	iisterea 10	i tile		Yes	No
	(i) un	related organizations										3a(i)	
		lated organizations .										3a(
ь 4		s" on 3a(II), are the rel be In Part XIII the Inte	_		•			.7 .		• • •		31)	
	rt VI	Land, Buildings,			= =									
		Complete If the or												
	Descrip	otion of property	(a) Cost or oth (investme		(b) Cost o	or other	basis (other)	(c) Acc	cumulated o	depreciation	(d)) Book valı	ue
1a	Land .													
b	Building	gs					125,88	82,152			3,052,705		12	2,829,447
С	Leaseho	old improvements					8,1	73,695			7,223,805			949,890
d	Equipm	ent					16,4	58,701			3,799,530		1	2,659,171
	Other													

Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c))

Part VII Investments—Other Securities.	Complete if the organizat	ion answe	rea res on r	orm 550, rare iv, mie 115.
See Form 990, Part X, line 12. (a) Description of security or cal (including name of security		(b) Book value	(c Cost o	c) Method of valuation r end-of-year market value
1) Financial derivatives				
2) Closely-held equity interests 3)Other	· · · · · · · ·			
A)				
3)				
))				
5)				
)				
5)				
H)				
otal. (Column (b) must equal Form 990, Part X, col (B) line 1	2)			
Investments—Program Related. Complete if the organization answe		art IV line	11c See Form	n 990 Part Y line 13
(a) Description of investment		ok value	(0	c) Method of valuation
.)			Cost o	r end-of-year market value
2)				
3)				
, (1)				
· · · · · · · · · · · · · · · · · · ·				
· ·)				
· ')				
3)				
9)				
9) ntal. (Column (h) must equal Form 990, Part X, col (R) line 1	3 }			
otal. (Column (b) must equal Form 990, Part X, col (B) line 1. Part IX Other Assets. Complete if the organize	ation answered 'Yes' on Fori	n 990, Part	IV, line 11d Sec	
otal. (Column (b) must equal Form 990, Part X, col (B) line 1.		n 990, Part	IV, line 11d Sei	e Form 990, Part X, line 15 (b) Book value
Otal. (Column (b) must equal Form 990, Part X, col (B) line 1. Part IX Other Assets. Complete if the organiz	ation answered 'Yes' on Fori	n 990, Part	IV, line 11d Sei	
Otal. (Column (b) must equal Form 990, Part X, col (B) line 1. Part IX Other Assets. Complete if the organize.)	ation answered 'Yes' on Fori	n 990, Part	IV, line 11d Sei	
otal. (Column (b) must equal Form 990, Part X, col (B) line 1. art IX Other Assets. Complete if the organize)	ation answered 'Yes' on Fori	n 990, Part	IV, line 11d Sec	
Otal. (Column (b) must equal Form 990, Part X, col (B) line 1. Other Assets. Complete if the organize.)	ation answered 'Yes' on Fori	n 990, Part	IV, line 11d Sec	
Otal. (Column (b) must equal Form 990, Part X, col (B) line 1. Other Assets. Complete if the organize.)	ation answered 'Yes' on Fori	n 990, Part	IV, line 11d Ser	
otal. (Column (b) must equal Form 990, Part X, col (B) line 1. Part IX Other Assets. Complete if the organize)))	ation answered 'Yes' on Fori	n 990, Part	IV, line 11d Ser	
otal. (Column (b) must equal Form 990, Part X, col (B) line 1. Part IX Other Assets. Complete if the organize () () () () () () () () () (ation answered 'Yes' on Fori	n 990, Part	IV, line 11d Ser	
Other Assets. Complete if the organize Other Assets. Ot	ation answered 'Yes' on Fori	n 990, Part	IV, line 11d Ser	
Other Assets. Complete if the organize Other	ation answered 'Yes' on Form	n 990, Part	IV, line 11d Sec	
Other Assets. Complete if the organize Other Liabilities.	ation answered 'Yes' on Form (a) Description (B) line 15)			(b) Book value
tal. (Column (b) must equal Form 990, Part X, col (B) line 1. art IX Other Assets. Complete if the organiz)))))))))))) ptal. (Column (b) must equal Form 990, Part X, col (Part X) Other Liabilities. Complete if the Control See Form 990, Part X, line 25.	ation answered 'Yes' on Form (a) Description (B) line 15) organization answered 'Yes' on Form (a) Description		n 990, Part IV,	(b) Book value
otal. (Column (b) must equal Form 990, Part X, col (B) line 1. Other Assets. Complete if the organize Other Liabilities. Complete if the organize See Form 990, Part X, line 25. (a) Description of liabilities.	ation answered 'Yes' on Form (a) Description (B) line 15) organization answered 'Yes' on Form (a) Description	es' on Forr	n 990, Part IV,	(b) Book value
Other Assets. Complete if the organize Other Liabilities. Complete if the organize See Form 990, Part X, line 25. (a) Description of liabilities. Federal income taxes	ation answered 'Yes' on Form (a) Description (B) line 15) organization answered 'Yes' on Form (a) Description	es' on Forr	n 990, Part IV,	(b) Book value
otal. (Column (b) must equal Form 990, Part X, col (B) line 1. Other Assets. Complete if the organize of the	ation answered 'Yes' on Form (a) Description (B) line 15) organization answered 'Yes' on Form (a) Description	es' on Forr	n 990, Part IV,	(b) Book value
otal. (Column (b) must equal Form 990, Part X, col (B) line 1. Other Assets. Complete if the organize of the	ation answered 'Yes' on Form (a) Description (B) line 15) organization answered 'Yes' on Form (a) Description	es' on Forr	n 990, Part IV,	(b) Book value
otal. (Column (b) must equal Form 990, Part X, col (B) line 1. Other Assets. Complete if the organize of the	ation answered 'Yes' on Form (a) Description (B) line 15) organization answered 'Yes' on Form (a) Description	es' on Forr	n 990, Part IV,	(b) Book value
Other Assets. Complete if the organization of the complete if	ation answered 'Yes' on Form (a) Description (B) line 15) organization answered 'Yes' on Form (a) Description	es' on Forr	n 990, Part IV,	(b) Book value
Other Assets. Complete if the organize Other Liabilities. Complete if the organize Other Liabilities. Complete if the organize See Form 990, Part X, line 25. (a) Description of liabilities. Other Liabilities. O	ation answered 'Yes' on Form (a) Description (B) line 15) organization answered 'Yes' on Form (a) Description	es' on Forr	n 990, Part IV,	(b) Book value
Other Assets. Complete if the organization of	ation answered 'Yes' on Form (a) Description (B) line 15) organization answered 'Yes' on Form (a) Description	es' on Forr	n 990, Part IV,	(b) Book value
Other Assets. Complete if the organization of the complete if the complete	ation answered 'Yes' on Form (a) Description (B) line 15) organization answered 'Yes' on Form (a) Description	es' on Forr	n 990, Part IV,	(b) Book value
Other Assets. Complete if the organization of	ation answered 'Yes' on Form (a) Description (B) line 15) organization answered 'Yes' on Form (a) Description	es' on Forr	n 990, Part IV,	(b) Book value

Amounts included on line 1 but not on Form 990, Part VIII, line 12

Amounts included on Form 990, Part IX, line 25, but not on line 1:

Other (Describe in Part XIII)

Supplemental Information

Investment expenses not included on Form 990, Part VIII, line 7b . . .

Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)

XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional information

Net unrealized gains (losses) on investments .

Donated services and use of facilities .

Recoveries of prior year grants . . .

Other (Describe in Part XIII) . . .

Add lines 2a through 2d . . .

Subtract line 2e from line 1 .

Add lines 4a and 4b . .

Return Reference

Part XI

1

2

а

b

3

4

b

5

Part XIII

Schedule D (Form 990) 2018

1,800,680

Page 4

3	Subtract line 2e from line 1	•			3		2,376,638,847
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1						
а	Investment expenses not included on Form 990, Part VIII, line 7b .	la		3,441,516			
b	Other (Describe in Part XIII)	1b					
c	Add lines 4a and 4b				4c		3,441,516
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)				5		2,380,080,363
Par	TXII Reconciliation of Expenses per Audited Financial Statement Complete if the organization answered 'Yes' on Form 990, Part IV			nses per F	Returi	n.	
1	Total expenses and losses per audited financial statements			•	1		1,991,975,135
2	Amounts included on line 1 but not on Form 990, Part IX, line 25						
а	Donated services and use of facilities	2a					
b	Prior year adjustments	Σb					
С	Other losses	2c					
d	Other (Describe in Part XIII)	2d					
е	Add lines 2a through 2d				2e		

Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2, Part

Explanation

2a

2b

2c

2d

1,800,680

2e

3

4c

5

3,441,516

3,441,516

1,995,416,651

1,991,975,135

Schedule D (Fo	orm 990) 2018		Page 5
Part XIII	Supplemental Info	rmation (continued)	
Ret	urn Reference	Explanation	
			Schedule D (Form 990) 2018

efile GRAPHIC print	HIC print - DO NOT PROCESS As Filed Data - DLN: 934933230043							
SCHEDULE F (Form 990)	State	ment of	Activities (Outside the Un	ited Sta	ates	OMB No 1545-0047	
(1 01111 000)	► Compl	ete if the organi	ızatıon answered "	Yes" to Form 990, Part IV, I	ıne 14b, 15,	or 16.	2018	
				to Form 990.	_			
Department of the Treasury Internal Revenue Service	•	Go to www.irs.	gov/Form990 for I	nstructions and the latest i	nformation.		Open to Public Inspection	
Name of the organization					E	mployer iden	tification number	
International Olympic Cor	nmittee				9	8-0123241		
	nformation Part IV, line		s Outside the l	Jnited States. Comple	ete if the o	rganızatıon a	nswered "Yes" to	
1 For grantmakers	s. Does the or	ganızatıon ma	ıntaın records to	substantiate the amoun	t of its gran	its and		
•	-		he grants or assi	stance, and the selection	criteria us	ed		
to award the gran	ts or assistant	ce?					✓ Yes ☐ No	
2 For grantmakers outside the United		Part V the org	anızatıon's proce	dures for monitoring the	use of its	grants and oth	ner assistance	
3 Activites per Region	n (The followin	g Part I, line 3	table can be dupli	cated if additional space is	s needed)			
(a) Region		(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region		program se specif	listed in (d) is a rvice, describe ic type of s) in region	(f) Total expenditures for and investments in region	
(1) See Add'l Data								
(2)								
(3)								
(4)								
(5)								
3a Sub-total b Total from continual	tion sheets to		0 0				1,107,893,000	
c Totals (add lines 3a			0 0		No 50082V		1,107,893,000 le F (Form 990) 2018	

(b) IRS code

section

(c) Region

(a) Name of

organization

(i) Method of

valuation

Page 2

206

	and EIN (if applicable)	9.4	34517 g. 4111	disbursement	assistance	assistance	(book, FMV, appraisal, other)
(1) See Add'l Data							
(2)							
(3)							
(4)							
(5)						Schedule	F (Form 990) 2018
(6)							

(e) Amount of

cash grant

(f) Manner of

cash

(a) Amount

of non-cash

(h) Description

of non-cash

IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

(d) Purpose of

grant

exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter

(5)				Schedule	F (Form 990) 2018
(6)					
(7)					
(8)					
/ 0\					

, ,				
(7)				
(8)				
(9)				
(10)				
(11)				
(12)				
/ 13)				

(9)				
(10)				
(11)				
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(13)				
(14)				
(15)				

(12)				
(13)				
(14)				
(15)				
/ 16)				

(14)								
(15)								
(16)								
2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-								

Part III

(4) (5) (6)

(7)

(8) (9)

(10) (11) (12) (13) (14) (15) (16)

(17) (18) Page **3**

Schedule F (Form 990) 2018

Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash	(g) Description of non-cash	(h) Method of valuation
		, '	,		assistance	assistance	(book, FMV, appraisal, other)
(1)							

	, 55, p, 5, 105	545.1.	 assistance	assistance	(book, FMV, appraisal, other)
(1)					
/ 2\					

				appraisal, other)
(1)				
(2)				
(3)				

Sche	dule F (Form 990) 2018		Page 4
Par	t IV Foreign Forms		
1	Was the organization a U S transferor of property to a foreign corporation during the tax year? If "Yes,"the organization may be required to file Form 926, Return by a U S Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	Yes	☑ No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U S Owner (see Instructions for Forms 3520 and 3520-A, don't file with Form 990)		
		☐ Yes	✓ No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign Corporations (see Instructions for Form 5471)		
	Corporations (see Instructions for Form 5471)	☐ Yes	✓ No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)	Yes	✓ No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships (see Instructions for Form 8865)		
	(see Instructions for Form 6005)	☐ Yes	✓ No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form		
	5713, don't file with Form 990)	☐ Yes	✓ No

Schedule F (F	orm 990) 2018 Page 5
	Supplemental Information Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).
990 Schedu Return	Explanation
Reference	
Schedule F, Part I, Line 2	Pursuant to the Olympic Charter, the IOC supports the staging of the Olympic Games and Olympic Winter Games with a financial contribution from the revenue it raises through its broadcast agreements and the global TOP sponsorship programme. In 2018, the amounts accrued related to the grants, contributions and other assistance to organizations or entities outside the United States was approximately \$1,107,893,000. These grants are intended to develop, promote, and protect the Olympic Movement in the recipients

recognition procedures to ensure that the organization demonstrates all conditions prescribed in the Olympic Charter and to confirm that funds are to be utilized to further the Olympic movement. The IOCs Executive Board monitors the conduct of the recipient organizations and may take appropriate action as necessary, to ensure that the recipient organizations are acting, and will continue to act, in the best interest of the Olympic Movement

990 Schedule F, Supplemental Information

Return

Reference	
Schedule F,	The International Olympic Committee (IOC) conducts program service activities on a global scale. A majority of the IOCs total
Part Lline 3	program expenditures, as reported on Form 990, Part IX, are conducted in regions outside of the United States. As an

Explanation

Part I, Line 3 program expenditures, as reported on Form 990, Part IX, are conducted in regions outside of the United States As an organisation based in Switzerland, the IOC holds investment assets in various regions outside of the United States The investment assets reported on Form 990, Part X include investment assets held in various regions outside of the United States

Additional Data

Europe (Including Iceland and

Greenland)

Software ID: Software Version:

EIN: 98-0123241

Name: International Olympic Committee

Olympic Revenue & MKG

342,572,614

Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
Central America and the Caribbean	0	0	Grantmaking	Olympic Revenue & MKG	10,620,947

0 Grantmaking

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i e , is a program service, for region describe specific type of agents in fundraising, program region service(s) in region services, grants to region recipients located in the region) North America Olympic Revenue & MKG 0 |Grantmaking 33,436,227 Russia and the Newly 0 |Grantmaking Olympic Revenue & MKG 4,729,039 Independent States

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i.e., is a program service, for region describe specific type of agents in fundraising, program region service(s) in region services, grants to region recipients located in the region) South America Olympic Revenue & MKG 6.565.867 0 |Grantmaking Sub-Saharan Africa 0 |Grantmaking Olympic Revenue & MKG 26,009,280

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i e , is a program service, for region describe specific type of agents in fundraising, program region service(s) in region services, grants to region recipients located in the region) Fast Asia and the Pacific Olympic Revenue & MKG 670,689,628 0 |Grantmaking Middle East and North Africa 0 |Grantmaking Olympic Revenue & MKG 13,269,398

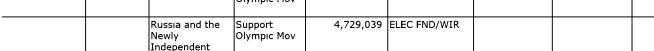
(ı) Method of l(b) IRS codel (h) Description (g) Amount of (f) Manner of valuation (d) Purpose of (e) Amount of (a) Name of section of (c) Region non-cash (book, FMV, cash and EIN(If cash grant organization grant non-cash disbursement assistance appraisal, applicable) assistance other) |Central America |Support 10,620,947 | ELEC FND/WIR

Form 990 Schedule F Part II - Grants or Entities Outside The United States

Iceland and Greenland)

	and the Carıbbean	Olympic Mov				
	· •	Support Olympic Mov	342,572,614	ELEC FND/WIR		

Form 990 Schedule F Part II - Grants or Entities Outside The United States (ı) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash and EIN(ıf cash grant organization grant non-cash disbursement assistance appraisal, applicable) assistance other) North America Support 33,436,227 | ELEC FND/WIR Olympic Mov Russia and the 4.729.039 ELEC FND/WIR Support



States

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description l(b) IRS code (q) Amount of (f) Manner of valuation (e) Amount of (a) Name of (d) Purpose of section (c) Region cash non-cash (book, FMV. and EIN(If cash grant organization grant non-cash disbursement assistance appraisal, applicable) assistance other) South America |Support 6,565,867 | ELEC FND/WIR Olympic Mov Sub-Saharan 26.009.280 ELEC FND/WIR Support Africa Olympic Mov

Form 990 Schedule F Part II - Grants or Entities Outside The United States (1) Method of (h) Description l(b) IRS code (f) Manner of (g) Amount of valuation (a) Name of (d) Purpose of (e) Amount of section (c) Region (book, FMV, non-cash cash and EIN(ıf organization grant cash grant non-cash disbursement assistance appraisal, applicable) assistance other) East Asia and Support 670,689,628 | ELEC FND/WIR Ithe Pacific Olympic Mov Middle East 13.269.398 ELEC FND/WIR Support land North Olympic Mov Africa

efile GRAPHIC print - DO	NOT PROCESS	As Filed Data -				DI	LN: 93493323004369
Note: To capture the full of Schedule I (Form 990) Department of the Treasury	content of this do	Grants and C Governments of the organiza	lect landscape mode other Assistance and Individuals tion answered "Yes," o Attach to Form v.irs.gov/Form990 for	ce to Organize in the Unite Porm 990, Part IV	ations, d States , line 21 or 22.		OMB No 1545-0047 2018 Open to Public Inspection
Internal Revenue Service Name of the organization International Olympic Committee	<u> </u>					Employer identifi 98-0123241	ication number
Does the organization main the selection criteria used Describe in Part IV the org Part II Grants and Other A	to award the grants anization's procedur Assistance to Dom	stantiate the amount of to or assistance? es for monitoring the use	e of grant funds in the Un nd Domestic Governme	ited States			✓ Yes No
(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) USOPC One Olympic Plz Colorado Springs, CO 80909	13-1548339	501(C)(3)	212,976,560				Support Olympic Movement
2 Enter total number of section 3 Enter total number of other For Paperwork Reduction Act Notice	er organizations listed	d in the line 1 table					1 0 :hedule I (Form 990) 2018

Schedule I (Form 990) 2018					Page 2
Grants and Other Ass Part III can be duplicate	ssistance to Domestic Indiv ated if additional space is need	iduals. Complete if the ordinate	ganization answered "Yes"	on Form 990, Part IV, line 22	
(a) Type of grant or assista	•		(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
1)					
2)					
(3)					
(4)					
5)					
(6)					
(7)			T		
Part IV Supplemental 1	Information. Provide the	information required in	n Part I, line 2; Part II'	I, column (b); and any other add	ditional information.
Return Reference	Explanation	Explanation			
Schedule I, Part I, Line 2	OC GRANT OF FUNDS AWARDED TO THE UNITED STATES OLYMPIC & PARALYMPIC COMMITTEE (USOPC) ARE AGREED UPON AND ADMINISTERED THROUGH A				

Schodula I /Form 000) 2019

DEFINITIVE AGREEMENT CONCLUDED ON 25 MAY 2012 Grants to U S charitable organizations are intended to develop, promote, and protect the Olympic Movement In the United States, in accordance with the Olympic Charter Prior to receiving a grant, a recipient organization is subject to recognition procedures to ensure that the

organization demonstrates all conditions prescribed in the Olympic Charter and to confirm that funds are to be utilized to further the Olympic movement. The IOCs Executive Board monitors the conduct of the recipient organizations and may take appropriate action as necessary, to ensure that the recipient organizations are acting, and will continue to act, in the best interest of the Olympic Movement

efil	e GRAPHIC pr	int - DO NOT PROCESS	As Filed Dat	ta -	DLN: 934	9332	3004	369
Sch	edule J	Co	mpensat	tion Information	OM	IB No	1545-0	0047
(For	n 990)	For certain Office	ers, Directors, 1	Trustees, Key Employees, and Hig	hest			
		► Complete if the org		sated Employees wered "Yes" on Form 990, Part IV	. line 23.	20	18	ζ .
_		-	► Attacl	h to Form 990.				
	tment of the Treasury al Revenue Service	► Go to <u>www.irs.go</u>	<u>v/<i>Form</i>1990</u> tor	or instructions and the latest infor	mation.		to Pul ectio	
	me of the organiza				Employer identificat	ion nu	ımber	
Inte	madonai Olympic Co	ommicee			98-0123241			
Pa	rt I Questi	ons Regarding Compensa	tion					
							Yes	No
1a				of the following to or for a person liste iny relevant information regarding the				
		or charter travel	$\mathbf{\nabla}$	Housing allowance or residence for	•			
	_	companions		Payments for business use of perso				
		nification and gross-up payment	s ☑	Health or social club dues or initiati				
	☐ Discretion	ary spending account		Personal services (e g , maid, chau	rreur, cner)			
b		kes in line 1a are checked, did th Il of the expenses described abo		follow a written policy regarding payn mplete Part III to explain	nent or reimbursement	1 b	Yes	
2				or allowing expenses incurred by all	- 1-2	2	Yes	
	directors, truste	es, officers, including the CEO/E	xecutive Directo	or, regarding the items checked in line	e la'			
3				sed to establish the compensation of t	he			
				not check any boxes for methods ECEO/Executive Director, but explain	ın Part III			
	✓ Compens		✓	Markey and a second as a second				
		ation committee ent compensation consultant		Written employment contract Compensation survey or study				
		of other organizations		Approval by the board or compensa	ation committee			
4		-	990. Part VII. Se	ection A, line 1a, with respect to the f				
	related orgániza		,	, , , ,	, ,			
а	Receive a sever	ance payment or change-of-cont	trol payment?			4a		No
b	Participate in, o	receive payment from, a suppl	emental nonqua	alıfıed retırement plan?		4b		No
С	•	receive payment from, an equi		-		4c		No
	If "Yes" to any o	of lines 4a-c, list the persons and	f provide the app	oplicable amounts for each item in Par	t III			
	Only 501(c)(3), 501(c)(4), and 501(c)(29)	organizations	s must complete lines 5-9.				
5	For persons liste		n A, line 1a, did	the organization pay or accrue any				
а	The organization	17				5a		No
b	Any related orga					5b		No
	If "Yes," on line	5a or 5b, describe in Part III						
6		ed on Form 990, Part VII, Sectio ontingent on the net earnings of		d the organization pay or accrue any				
а	The organization	٦٦				6a		No
b	Any related orga					6b		No
	•	6a or 6b, describe in Part III						
7		ed on Form 990, Part VII, Sectio escribed in lines 5 and 67 If "Yes		d the organization provide any nonfixe Part III	d	7		No
8				ured pursuant to a contract that was s section 53 4958-4(a)(3)? If "Yes," d	escribe			
		O did the organization also falls	uz tha rahiittati.	o programation procedure decembed in	Pogulations section	8		No
9	53 4958-6(c)?	s, aid the organization also follo	w the reputtable	e presumption procedure described in	Regulations section	9		
For I	Danerwork Bedi	ction Act Notice, see the Ins	tructions for Fo	Form 990 Cat No	50053T Schedule 1	/Form	990)	2018

Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed. the individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the nstructions, on row (ii) Do not list any individuals that are not listed on Form 990, Part VII Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual							
(A) Name and Title	(B) Break	kdown of W-2 and/o compensation	or 1099-MISC	and other	(D) Nontaxable benefits	columns	(F) Compensation in
	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	deferred compensation		(B)(ı)-(D)	column (B) reported as deferred on prior Form 990
See Additional Data Table							

Schedule 3 (1 0/11/ 330) 2010	rage 3
Part III Supplemental Inform	nation
Provide the information, explanation, or	descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II Also complete this part for any additional information
Return Reference	Explanation
•	THE IOCS EXECUTIVE BOARD MEMBERS, INCLUDING THE IOC PRESIDENT, ARE CONSIDERED TO BE VOLUNTEERS UPON REQUEST BY AN IOC EXECUTIVE BOARD MEMBER (FOLLOWING A SIMPLE PROCESS), A PORTION OF THEIR RESPECTIVE FUNCTIONS WITHIN THE IOC, ARE COMPENSATED BY A FIXED AMOUNT THE FIXED AMOUNT MAY VARY IN RELATION TO THE FUNCTIONS BEING PERFORMED BY

INCLUDED WITHIN THE IOCS ANNUAL REPORT, WHICH IS PUBLICLY AVAILABLE ON THE IOCS WEBSITE

THE INDIVIDUAL THESE COSTS ARE INCLUDED IN THE STATEMENT OF FUNCTIONAL EXPENSES ON FORM 990, AS WELL AS THE STATEMENT OF ACTIVITIES

Schedule 1 (Form 990) 2018

Return Reference	Explanation
Schedule J, Part I, Line 1a	EXPENSES INCURRED FOR TRAVEL AND ACCOMMODATIONS DURING THE EXECUTION OF THE IOC MEMBERS' FUNCTIONS, ARE COVERED BY THE IOC THE
	INDEMNITY POLICY FOR THE IOC MEMBERS AND THE IOC PRESIDENT IS AS FOLLOWS -IOC MEMBERS AND IOC HONORARY MEMBERS ANNUAL ADMINISTRATIVE
	SUPPORT \$7,000 USD -DAILY INDEMNITY FOR THE IOC MEMBERS FOR ALL TYPES OF MEETINGS, INCLUDING COMMISSIONS, SESSIONS AND OLYMPIC GAMES
	(TO COVER THE TIME OF TRAVEL, THE DAYS BEFORE AND AFTER THE MEETINGS ARE COMPENSATED) \$450 USD -DAILY INDEMNITY FOR IOC COMMISSION
	CHAIRS FOR THEIR OWN COMMISSION MEETINGS (TO COVER THE TIME OF TRAVEL, THE DAYS BEFORE AND AFTER THE MEETINGS ARE COMPENSATED) 2 X
	\$450 USD -DAILY INDEMNITY FOR IOC EXECUTIVE BOARD MEMBERS FOR EXECUTIVE BOARD MEETINGS (TO COVER THE TIME OF TRAVEL, THE DAYS BEFORE
	AND AFTER THE MEETINGS ARE COMPENSATED) 2 X \$450 USD -THE RESPECTIVE INDEMNITIES CAN BE ALLOCATED BY THE PRESIDENT WHEN HE REQUESTS A
	MEMBER FOR A SPECIAL MISSION THESE COSTS ARE INCLUDED IN THE STATEMENT OF FUNCTIONAL EXPENSES ON FORM 990, AS WELL AS THE STATEMENT OF
	ACTIVITIES UNDER TRANSPORT, TRAVEL, AND RESIDENCE EXPENSES WITHIN IN THE IOCS ANNUAL REPORT, WHICH IS PUBLICLY AVAILABLE ON THE IOCS
	WEBSITE THE IOC PRESIDENT WILL BE TREATED IN THE SAME WAY AND ENTITLED TO THE SAME INDEMNITY AS THE EXECUTIVE BOARD MEMBERS DURING THE
	MEETINGS OF THE EXECUTIVE BOARD, AND AS ANY IOC EXECUTIVE BOARD MEMBER DURING THE OLYMPIC GAMES ACCORDING TO THE OBLIGATIONS AND
	RIGHTS ATTRIBUTED TO HIM IN THE OLYMPIC CHARTER, THE IOC PRESIDENT HAS THE FUNCTION OF AN EXECUTIVE PRESIDENT THEREFORE, THE PRESIDENT IS
	ON MISSION FOR THE IOC 365 DAYS A YEAR IN LINE WITH PAST PRACTICES AND LIKE ALL OTHER IOC MEMBERS, THE IOC PRESIDENT RECEIVES AN INDEMNITY
	TO PARTIALLY COVER HIS EXPENSES THE PRESIDENT RECEIVES NEITHER THE FIXED ANNUAL SUPPORT NOR THE DAILY INDEMNITY RELATED TO ALL
	COMMISSION MEETINGS OR OTHER MISSIONS THAT HE IS ENTITLED TO AS AN IOC MEMBER INSTEAD, TO COVER SOME OF THE PRESIDENT'S PERSONAL COSTS
	RELATED TO THE EXECUTION OF HIS FUNCTION, THE ETHICS COMMISSION DECIDED ON A SINGLE ANNUAL FIXED INDEMNITY AMOUNT, LINKED TO INFLATION,
	OF EUR 225 THOUSAND IN LINE WITH THE INDEMNITY POLICY, THE IOC COVERS THE COSTS OF THE PRESIDENT'S EXPENSES, WHICH AMOUNTED TO \$319
	THOUSAND USD IN 2018, AND \$286 THOUSAND USD IN 2017 (THIS VARIATION IS DUE TO FOREIGN EXCHANGE RATES) THESE AMOUNTS INCLUDE THE EUR 225
	THOUSAND ANNUAL INDEMNITY AS DECIDED BY THE ETHICS COMMISSION CONSISTENT WITH PAST PRACTICE, AN ANNUAL AMOUNT OF \$121 THOUSAND USD
	WAS PAID BY THE IOC TO COVER THE INCOME TAX EXPENSE RELATED TO THE IOC PRESIDENT'S ACTIVITIES IN SWITZERLAND THE COSTS OF THESE EXPENSES
	ARE NOT TREATED AS COMPENSATION TO THE PRESIDENT FOR SWISS INCOME TAX PURPOSES, AND THE INCOME TAX PAID TO COVER THE PRESIDENTS
	EXPENSE ALLOWANCES IS PAID DIRECTLY TO SWISS TAX AUTHORITIES BY THE IOC THESE COSTS ARE INCLUDED IN THE STATEMENT OF FUNCTIONAL
	EXPENSES ON FORM 990, AS WELL AS THE STATEMENT OF ACTIVITIES UNDER TRANSPORT, TRAVEL, AND RESIDENCE EXPENSES WITHIN THE IOCS ANNUAL
	REPORT, WHICH IS PUBLICLY AVAILABLE ON THE IOCS WEBSITE

2018 Schedule 1

Christophe De Kepper

Chief Finance Officer

Deputy Director General

OLYMPIC GAMES EXEC DIRECTOR

NOC and OS Director

CHIEF INFORMATION TECH

Spokesman Services

DIRECTOR MEDICAL & SCIENTIFIC

Special Legal Advisor

Pquerette Gırard-Zappellı

Richard Budgett

Howard Stupp

CHIEF ETHICS & COMPLIANCE OFF

MARIE SALLOIS

Director CoBraS

Director General

Lana Haddad

Christophe Dubi

James MacLeod

Kıt McConnell

Gerry Pennell

OFFICER Mark Adams

Director

Sports Director

Pere Mır

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Software ID:

Software Version:

EIN: 98-0123241

Name: International Olympic Committee

Form 000 Schodule 1	Part II - Officers, Directors, Trustees, Key Employees, and I	Highost Components	d Employees		
roi ili 990, Scheuule J,	Part II - Officers, Directors, Trustees, Key Employees, and I	nigilest collipelisate	u Employees		
(A) Name and Title	(B) Breakdown of W-2 and/or 1099-MISC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation in

17,189

85,125

16,609

15,539

14,825

15,744

17,639

31,145

16,109

43,143

19,293

78,733

Other reportable

compensation

compensation

109,429

70,139

76,262

77,854

32,685

58,811

63,714

64,874

59,716

61,523

51,368

52,317

(B)(i)-(D)

1,260,914

665,096

804,114

779,815

395,170

517,678

527,674

556,490

524,433

521,984

492,605

479,006

24,530

24,530

24,530

24,530

21,464

24,530

24,530

24,530

24,530

24,530

24,530

24,530

column (B)

reported as deferred on

prior Form 990

rm 990, Schedule J,	Part II - Officers, Di	irectors, Trustees, K	ey Employees, and I	Highest Compensate	d Employees	
(A) Name and Title	(B) Breakdown	of W-2 and/or 1099-MIS	(C) Retirement and	(D) Nontaxable	(
	(i) Base Compensation	(ii)	(iii)	other deferred	benefits	

Fo

719,333

377,984

406,746

493,249

267,222

321,496

334,914

333,733

306,539

341,809

263,522

292,764

orin 330, Schedule 3,	Tare 11 Officers, Directors, Trustees, Rey Employees, und I	inglicat compensate	a Employees
(A) Name and Title	(B) Breakdown of W-2 and/or 1099-MISC compensation	(C) Retirement and	(D) Nontaxable

(A) Name and Title	(B) Breakdown of W-2 and/or 1099-MISC compensation	(C) Retirement and	(D) Nontaxable

390,433

107,318

279,967

168,643

58,974

97,097

86,877

102,208

117,539

50,979

133,892

30,662

Bonus & incentive

compensation

DLN: 93493323004369 OMB No 1545-0047 SCHEDULE O Supplemental Information to Form 990 or 990-EZ (Form 990 or 990-Complete to provide information for responses to specific questions on EZ) Form 990 or 990-EZ or to provide any additional information. ▶ Attach to Form 990 or 990-EZ. Open to Public ▶ Go to www.irs.gov/Form990 for the latest information. Inspection Department of the Treasury Namel Betherorganization **Employer identification number** International Olympic Committee 98-0123241 990 Schedule O, Supplemental Information **Explanation** Return Reference Form 990. FORM 990, BOX E The organisation's telephone number is +41 21 621 61 11 Organization Missi on CONTINUED BY ENCOURAGING AND SUPPORTING organisation, development and coordination of s Part III, Line port and sports competitions in accordance with the Olympic Charter The IOCs role is -To encourage and support the promotion of ethics and good governance in sport, as well as ed ucation of youth through sport and to dedicate its efforts to ensure that, in sport, the s pirit of fair play prevails and violence is banned, - To encourage and support the organis ation, development and coordination of sport and sports competitions, - To ensure the regu lar celebration of the Olympic games, - To cooperate with the competent public or private organizations and authorities in the endeavour to place sport at the service of humanity a nd thereby to promote peace, - To take action to strengthen the unity of the Olympic Movem ent, to protect its independence, to maintain and promote its political neutrality and to preserve the autonomy of sport, - To act against any form of discrimination affecting the Olympic Movement, - To encourage and support elected representatives of athletes with the Olympic Movement, with the IOC Athletes Commission acting as their supreme representative on all Olympic Games and related matters, - To encourage and support the promotion of wome n in sport at all levels and in all structures with a view to implementing the principle o f equality of men and women, - To protect clean athletes and the integrity of sport, by le ading the fight against doping, and by taking action against all forms of manipulation of competitions and related corruption, - To encourage and support measures relating to the m edical care and health of athletes, - To oppose any political or commercial abuse of sport and athletes, - To encourage and support the efforts of sports organisations and public a uthorities to provide for the social and professional future of athletes, - To encourage a nd support the development of sport for all, - To encourage and support a responsible conc ern for environmental issues, to promote sustainable development in sport and to require t hat the Olympic Games are held accordingly, - To promote a positive legacy from the Olympi c Games to the host cities, regions and countries, - To encourage and support initiatives blending sport with culture and education, - To encourage and support the activities of the e International Olympic Academy and other institutions which dedicate themselves to Olympi c education, and - To promote safe sport and the protection of athletes from all forms of harassment and abuse

Return Reference	Explanation
Form 990,	Financial Statements The International Olympic Committee (IOC) is an international non-gov
Part IV, Line	ernment not-for-profit association organized in Switzerland, and functions in accordance w
12b & Form	ith the Swiss Civil Code. The consolidated financial statements of the IOC, as audited by
990, Part XII,	an independent accountant, are prepared in accordance with and comply with the Internation
Line 2b	al Financial Reporting Standards and as well the Swiss Law

Return Reference	Explanation
Form 990, Part VI, Line 6	Explanation of Classes of Members or Shareholders The IOC is comprised of members who are natural persons, not to exceed a total of 115 individuals. The members represent and promo te the interests of the IOC and the Olympic Movement in their countries and in the organis ations of the Olympic Movement in which they service. The members vote on important decisions related to the IOC, including the election of host cities for the Olympic games, chang es to the Olympic charter, and election of new members, the IOC executive board and the IOC. President. The members of the IOC are comprised of - A majority of members whose member ships are not linked to any specific function or office, including up to five members who may be elected in special cases, their total may not exceed 70 and there may be no more than one such member national of any given country, - Active athletes the number of whom may not exceed 15 - Presidents or persons holding an executive or senior leadership position within International Federations, associations of International Federations or other organ izations recognized by the IOC, the total number of whom may not exceed 15, and - Presiden ts or persons holding an executive or senior leadership position within National Olympic C ommittees or world or continental associations of National Olympic Committees, the total number of whom may not exceed 15, there may be no more than one such member national of any given country within the IOC.

Return Explanation

Form 990,	How Members or Shareholders Elect Governing Body The IOC members have the power to elect t
Part VI, Line	he Executive Board of the IOC, which is carried out by vote during the general meeting of
7a	the IOC members

Return Reference	Explanation
Form 990, Part VI, Line 7b	Decisions of Governing Body Approved by Members or Shareholders During the general meeting of the members of the IOC, the members vote on the following - To adopt or amend the Oly mpic Charter - To elect members of the IOC, the honorary president, honorary members and honour members, - To elect the President, the Vice Presidents and all other members of the IOC Executive Board, - To adopt or amend the Athletes Rights and Responsibilities Declaration - To resolve and decide upon all other matters assigned to it by law or by the Olympic Charter The Executive Board assumes the overall responsibility for the administration of the IOC and management of its affairs, including approving all internal governance regula tions relating to the organisation

Return Explanation

Return Reference	Explanation
Form 990, Part VI, Line 12c	Monitoring and Enforcement of Conflicts of Interest Policy The IOC's Conflict of Interest policies and procedures are detailed within the IOC Code of Ethics, under the section titl ed "Rules Concerning Conflicts of Interests Affecting the Behaviour of Olympic Parties" The IOC Code of Ethics is readily available to the public and forms an integral part of the Olympic Charter Prior to examination by the IOC Executive Board of a candidature for election as an IOC Member, a candidate must declare any risks of conflicts of interests to the IOC Chief Ethics and Compliance Officer. The attention of the candidate may be drawn to any potential conflicts of interest identified. It is the personal responsibility of each person to avoid any case of conflict of interest. Faced with a situation of a potential conflict of interest, the person concerned must refrain from expressing an opinion, from making or participating in making a decision or accepting any form of benefit whatsoever. How ever, if the person wishes to continue to act, or if the person is uncertain as to the ste ps to take, the person must inform the IOC Chief Ethics and Compliance Officer of the situation, who then takes the steps below. The IOC Chief Ethics and Compliance Officer is responsible for advising persons, at their request, in a situation of a potential conflict of interests. The person concerned is then offered a solution from the following options (1) registering the declaration without any particular measure, (2) removal of the person involved from part or all of the action or from the decision of the Olympic part at the root of the conflict, (3) relinquishment of the management of the external interest causing the conflict, or (4) any complementary measures. The person concerned then takes the steps that the/she considers appropriate. In the event that a person neglects to declare a situation of a potential conflict of interests, and/or is in an actual conflict of interest situat ion, the IOC Chief Ethics and Compliance Officer may refer the c

Return Reference	Explanation
Form 990, Part VI, Lines 15a & 15b	Compensation Review and Approval Process Subject to the powers and duties of the IOC President and of the Executive Board, the mandate of the HR Committee is to review, report on a nd, if required, make recommendations to the IOC President, the Executive Board or managem ent on matters relating to compensation policy. The duties and responsibilities of the HR. Committee include the approval of compensation as per the process included in the IOC HR Committee Charter. The President submits the proposed compensation for the Director General to the HR Committee, who then reviews and approves the Director Generals compensation. The

ommittee Charter The President submits the proposed compensation for the Director General to the HR Committee, who then reviews and approves the Director Generals compensation The President, in collaboration with the Director General, submits compensation proposals for the Executive Management, which is then reviewed and approved by the HR Committee Compensation decisions utilise knowledge and expertise of the market and comparable data availa ble Contemporaneous substantiation of compensation decisions are recorded

Return Explanation
Reference

Form 990,
Part VI, Line

Availability of Governing Documents to the Public The IOC Statues and By-Laws, which form part of the Olympic Charter, Code of Ethics, and the Annual Report, which includes the fin ancial statements, can be found on its website at www olympic org

Return Reference	Explanation
FORM 990, PART V, LINE 2A & PART VII, SECTION A	Compensation Employees of the IOC are not U S residents or U S employees, therefore, the compensation information for these individuals is provided using the best information available form W-2 equivalents

Return Explanation
Reference

Form 990,
Prior period net asset adjustment - beginning of year net assets reported on consolidated
basis to current year net assets reported on separate basis

efile GRAPHIC print - DO NOT PROCESS As Filed Data -**SCHEDULE R**

Related Organizations and Unrelated Partnerships

► Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

2018

Employer identification number

98-0123241

DLN: 93493323004369

OMB No 1545-0047

Open to Public Inspection

Internal Revenue Service Name of the organization International Olympic Committee

(Form 990)

Department of the Treasury

► Attach to Form 990. ▶ Go to www.irs.gov/Form990 for instructions and the latest information.

Part I Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33. (a) (b) (c) (d) (e) (f) Name, address, and EIN (if applicable) of disregarded entity Primary activity Legal domicile (state Total income End-of-year assets Direct controlling or foreign country) entity Part II Identification of Related Tax-Exempt Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year. (a) Name, address, and EIN of related organization (b) (c) (d) (e) (f) (g) Primary activity Legal domicile (state Exempt Code section Public charity status Direct controlling Section 512(b) or foreign country) (if section 501(c)(3)) entity (13) controlled entity? Yes No (1)Olympic Foundation PROMOTE OLYM SZ N/A N/A NA Yes CHATEAU DE VIDY LAUSANNE (2) The Olympic FNDN for Culture & HERITAGE PROMOTE OLYM SZ N/A N/A NA Yes QUAI DOUCHY 1 LAUSANNE (3) Foundation for Universal Olympic Ethics SZ N/A NΑ PROMOTE OLYM N/A Yes CHATEAU DE VIDY LAUSANNE (4)International Olympic Truce Foundation PROMOTE OLYM SZ N/A N/A NA Yes CHATEAU DE VIDY LAUSANNE SZ For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat No 50135Y Schedule R (Form 990) 2018

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Part III Identification of Related Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.

(a) Name, address, and EIN of related organization		(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	Predomir income(re unrelated excluded tax und sections 5 514)	nant elated, ed, from der 512-	(f) Share of total income	(g) Share of end-of-year assets	(H Disprop alloca	rtionate	Code V amount 20 c Schedul (Form 1	/-UBI in box of le K-1		al or	(F Perce owne	
					314)	' l			Yes	No	1	ľ	Yes	No		
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Part IV Identification of Related Organiz	ations Taxable as a C	orporation	or Trus	t Complete	of the ord	ganiza	ation ansv	vered "Yes	" on Fo	orm 91	ባስ Par	+ IV	line i	34		
						J			•	J J	20, i ui	,		J 1		
	organizations treated as	a corporatio	n or tru	st during th	ie tax yea	ar.										
(a)	(b)	a corporatio	n or tru	st during th	e tax yea	ar.	(e)	(f)	<u> </u>	(g)		(h))		(ı)) [12(b)
	 ,	a corporatio (on or tru c) egal nicile	st during th	ie tax yea	ar. Type	(e)		Share) tage	Se	(ı) ection : l3) con) 512(b) ntrolled
(a) Name, address, and EIN of	(b)	a corporatio (Le don (state o	on or tru egal nicile or foreign	st during th	(d) controlling	Type (C cor	(e) of entity	(f) Share of total	Share	(g) e of end-		(h) Percent) tage	Se (1	L3) con entit	ntrolled ty?
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(a) Name, address, and EIN of related organization (1)IOC Television & Marketing Services SA Chteau de Vidy Lausanne	(b) Primary activity	a corporatio (Le don (state o cou	on or tru c) egal nicile or foreign ntry)	st during th	e tax yea (d) controlling entity	Type (C cor	(e) of entity p, S corp, trust)	(f) Share of total Income	Share	(g) of end- year	-of-	(h) Percent owners) tage	Se (1	l3) con entit Yes	trolled ty?
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(a) Name, address, and EIN of related organization (1)IOC Television & Marketing Services SA Chteau de Vidy Lausanne SZ (2)Olympic Broadcasting Services SA (OBS SA	(b) Primary activity	a corporatio (Le don (state o cou	on or tru c) egal nicile or foreign ntry)	St during the Direct	e tax yea (d) controlling entity	Type (C cor	(e) of entity p, S corp, trust)	(f) Share of total Income	Share	(g) of end- year	0 ((h) Percent owners) tage	Se (1	l3) con entit Yes	trolled ty?
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(a) Name, address, and EIN of related organization (1)IOC Television & Marketing Services SA Chteau de Vidy Lausanne SZ (2)Olympic Broadcasting Services SA (OBS SA Chteau de Vidy Lausanne SZ (3)Olympic Channel Services SA (OCS SA) Chteau de Vidy Lausanne	(b) Primary activity IOC SERVICE COMP IOC SERVICE COMP	a corporatio (Le don (state o cou	c) egal nicile nicile nicile nicile strong foreign ntry)	Direct NA NA	e tax yea (d) controlling entity	Type (C corror or Foreign	(e) of entity p, S corp, trust)	(f) Share of total income (Share	(g) of end- year	0 ((h) Percent owners 0 %) tage	Se (1	A Yes	trolled ty?
(a) Name, address, and EIN of related organization (1)IOC Television & Marketing Services SA Chteau de Vidy Lausanne SZ (2)Olympic Broadcasting Services SA (OBS SA Chteau de Vidy Lausanne SZ (3)Olympic Channel Services SA (OCS SA) Chteau de Vidy Lausanne SZ	(b) Primary activity IOC SERVICE COMP IOC SERVICE COMP	s a corporatio (Le dom (state o cou	c) egal nicile nicile nicile ntry)	Direct NA NA	e tax yea (d) controlling entity	Type (C corror or Foreigr	(e) of entity p, S corp, trust) n corp	(f) Share of total income (Share	(g) of end- year	0 ((h) Percent owners 0 %) tage	See (1	13) con entit Yes Yes Yes	trolled ty?
(a) Name, address, and EIN of related organization (1)IOC Television & Marketing Services SA Chteau de Vidy Lausanne SZ (2)Olympic Broadcasting Services SA (OBS SA Chteau de Vidy Lausanne SZ (3)Olympic Channel Services SA (OCS SA) Chteau de Vidy Lausanne	(b) Primary activity IOC SERVICE COMP IOC SERVICE COMP	s a corporatio (Le dom (state o cou	c) egal nicile nicile nicile nicile strong foreign ntry)	Direct NA NA	e tax yea (d) controlling entity	Type (C corror or Foreign	(e) of entity p, S corp, trust) n corp	(f) Share of total income (Share	(g) of end- year	0 ((h) Percent owners 0 %) tage	See (1	A Yes	trolled ty?
(a) Name, address, and EIN of related organization (1)IOC Television & Marketing Services SA Chteau de Vidy Lausanne SZ (2)Olympic Broadcasting Services SA (OBS SA Chteau de Vidy Lausanne SZ (3)Olympic Channel Services SA (OCS SA) Chteau de Vidy Lausanne SZ (4)Olympic Broadcasting Services SL (OBS) Torrelaguna 75	(b) Primary activity IOC SERVICE COMP IOC SERVICE COMP	s a corporatio (Le dom (state o cou	c) egal nicile nicile nicile ntry)	Direct NA NA	e tax yea (d) controlling entity	Type (C corror or Foreigr	(e) of entity p, S corp, trust) n corp	(f) Share of total income (Share	(g) of end- year	0 ((h) Percent owners 0 %) tage	See (1	13) con entit Yes Yes Yes	trolled ty?
(a) Name, address, and EIN of related organization (1)IOC Television & Marketing Services SA Chteau de Vidy Lausanne SZ (2)Olympic Broadcasting Services SA (OBS SA Chteau de Vidy Lausanne SZ (3)Olympic Channel Services SA (OCS SA) Chteau de Vidy Lausanne SZ (4)Olympic Broadcasting Services SL (OBS) Torrelaguna 75 Madrid	(b) Primary activity IOC SERVICE COMP IOC SERVICE COMP	s a corporatio (Le dom (state o cou	c) egal nicile nicile nicile ntry)	Direct NA NA	e tax yea (d) controlling entity	Type (C corror or Foreigr	(e) of entity p, S corp, trust) n corp	(f) Share of total income (Share	(g) of end- year	0 ((h) Percent owners 0 %) tage	See (1	13) con entit Yes Yes Yes	trolled ty?
(a) Name, address, and EIN of related organization (1)IOC Television & Marketing Services SA Chteau de Vidy Lausanne SZ (2)Olympic Broadcasting Services SA (OBS SA Chteau de Vidy Lausanne SZ (3)Olympic Channel Services SA (OCS SA) Chteau de Vidy Lausanne SZ (4)Olympic Broadcasting Services SL (OBS) Torrelaguna 75	(b) Primary activity IOC SERVICE COMP IOC SERVICE COMP	s a corporatio (Le dom (state o cou	c) egal nicile nicile nicile ntry)	Direct NA NA	de tax yea	Type (C corror or Foreigr	(e) of entity p, S corp, trust) n corp	(f) Share of total income (Share	(g) of end- year	0 (0 ((h) Percent owners 0 %) tage	See (1	13) con entit Yes Yes Yes	trolled ty?

Schedule R (Form 990) 2018				
Part V Transactions With Related Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.				
Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule		Yes	No	
1 During the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?		1		
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or(iv) rent from a controlled entity	1a	<u>, † </u>	No	
b Gift, grant, or capital contribution to related organization(s)	1b	Yes		
c Gift, grant, or capital contribution from related organization(s)	10	:	No	
d Loans or loan guarantees to or for related organization(s)	1d	il —	No	
e Loans or loan guarantees by related organization(s)	1e	:	No	
f Dividends from related organization(s)	1f	:	No	
g Sale of assets to related organization(s)	1 g	,†	No	
h Purchase of assets from related organization(s)	1h		No	
i Exchange of assets with related organization(s)	1 i		No	
j Lease of facilities, equipment, or other assets to related organization(s)	1 <u>j</u>	1	No	
k Lease of facilities, equipment, or other assets from related organization(s)	114	[No	
l Performance of services or membership or fundraising solicitations for related organization(s)	. 11	T	No	
m Performance of services or membership or fundraising solicitations by related organization(s)	1n	n	No	

h	Purchase of assets from related organization(s)	1h		No
i	Exchange of assets with related organization(s)	1 i		No
j	Lease of facilities, equipment, or other assets to related organization(s)	1j		No
k	Lease of facilities, equipment, or other assets from related organization(s)	1k		No
ı	Performance of services or membership or fundraising solicitations for related organization(s)	11		No
n	Performance of services or membership or fundraising solicitations by related organization(s)	1m		No
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n	Yes	
o	Sharing of paid employees with related organization(s)	10	Yes	
р	Reimbursement paid to related organization(s) for expenses	1p	Yes	
q	Reimbursement paid by related organization(s) for expenses	1 q		No

n Shan	ng of facilities, equipment, maining lists, of other assets with related organization(s)				11		l
o Shar	ing of paid employees with related organization(s)				10	Yes	
p Rein	nbursement paid to related organization(s) for expenses				1p	Yes	
	nbursement paid by related organization(s) for expenses				1 q		No
r Othe	r transfer of cash or property to related organization(s)				1r		No
	r transfer of cash or property from related organization(s)				1s		No
S Othe	e answer to any of the above is "Yes," see the instructions for information on who must complete this	line, including covered	relationships and trai	nsaction thresholds			
			•				
		· -					
	(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining a	mount II	nvolvec	
		Transaction			mount II	nvolved	<u> </u>
		Transaction			mount II	nvolved	!
		Transaction			mount II	nvolved	1
		Transaction			mount II	nvolved	1

Part VI Unrelated Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

													
(a) Name, address, and EIN of entity	(b) Primary activity		(d) Predominant Income (related, unrelated, excluded from tax under sections 512- 514)	Ar or	(e) re all partners section 501(c)(3) rganizations?	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtiona allocations?	ite	(1) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)		or ig ?	(k) Percentage ownership
İ			514)	Yes	No	ļ ,		Yes	No		Yes	No	
									_	Schedul	e R (Form	1 990)) 2018

Schedule R (Form 990) 2018							
Part VII Supplemental Information							
Provide additional infor	Provide additional information for responses to questions on Schedule R (see instructions)						
Return Reference Explanation							
Schedule R, Part II, Column d Each organisation listed is classified as a public utility organization, and is tax-exempt under Swiss Direct Federal Income Tax Law							

Return Reference	Explanation
	THE IOC HAS VARIOUS CONTRACTUAL ARRANGEMENTS WITH ITS RELATED ORGANISATIONS, ALL OF WHICH ARE CONDUCTED AT ARM'S LENGTH ALL TRANSACTIONS WITH RELATED ORGANISATIONS ARE IN CONNECTION WITH THE OLYMPIC MOVEMENT

Schedule R (Form 990) 2018

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii) Do not list any individuals that aren't listed on Form 990, Part VII

Note: The sum of columns (B)(I)-(III) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual

		(B) Breakdown of W-2 and		or 1099-MISC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name and Title		(I) Base compensation	(II) Bonus & incentive compensation	(III) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	in column (B) reported as deferred on prior Form 990
THOMAS BACH	Ξ	0	0	0	0	0	0	0
1 F OF IO E BUTH E PORF	Ξ	0	0	0	0	0	0	0
ANITA L. DEFRANTZ	Ξ	0	0	0	0	0	0	0
2 F OF IO E ENTI E PORF	Ξ	0	0	0	0	0	0	0
UGUR ERDENER	Ξ	0	0	0	0	0	0	0
3 F OF IO E E UTI E PORF	Ξ	0	0	0	0	0	0	0
GOLDEN HOLERON	Ξ	0	0	0	0	0	0	0
4 F OF ION E ENTI E POTED	Ξ	0	0	0	0	0	0	0
ZAIQING YU	Ξ	0	0	0	0	0	0	0
5 F OF IO E E UTI E FOIRD	Ξ	0	0	0	0	0	0	0
SERGEY BUBKA	(i)	0	0	0	0	0	0	0
610 E E HT E POEFD HEHPEF	Ξ	0	0	0	0	0	0	0
KIRSTY COVENTRY	Ξ	0	0	0	0	0	0	0
7 IO E E UTI E POSED HEHEEF	Ξ	0	0	0	0	0	0	0
IVO FERRIANI	Ξ	0	0	0	0	0	0	0
810 E E UTI E POSKO HEHBEK	Ξ	0	0	0	0	0	0	0
THE OTE THE LEFTS HOE EFTS	Ξ	0	0	0	0	0	0	0
9 DO E E HIT E POSED HEHBER	(II)	0	0	0	0	0	0	0
GIAN FRANCO KASPE	(i)	0	0	0	0	0	0	0
10 IO E E UTI E POSED HEHEEF	Ξ	0	0	0	0	0	0	0
GUNILLA LINDBERG	(i)	0	0	0	0	0	0	0
1110 E EUTI E POSED HEHBER	Ξ	0	0	0	0	0	0	0
ULTER FILLS HILL DUELL	Ξ	0	0	0	0	0	0	0
12 FO E E UTI E POSED HEHEER	Ξ	0	0	0	0	0	0	0
NENAD LALOVIC	Ξ	0	0	0	0	0	0	0
13 CO E E UTI E POSED HEHBER	(II)	0	0	0	0	0	0	0
ROBIN EVERETT MITCHELL	Ξ	0	0	0	0	0	0	0
14 DO E E UTI E POSED HEHBER	(II)	0	0	0	0	0	0	0
SER MIANG NG	Ξ	0	0	0	0	0	0	0
EF	Ξ	0	0	0	0	0	0	0
DENIS ANDRÉ OSWALD	Ξ	0	0	0	0	0	0	0
16 IO E E UTI E POSED HEHEEF	Ξ	0	0	0	0	0	0	0

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii) Do not list any individuals that aren't listed on Form 990, Part VII

Note: The sum of columns (B)(I)-(III) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that Individual

		(B) Broakdown	2/pue C-/W 30	7 1000 MISC	(a) Breakdown of M/-2 and/or 1080-MISC compensation				
(A) Name and Title		(I) Base compensation	(ii) Bonus & incentive compensation	& incentive Insation	(iii) Other reportable compensation	(c) Ketirement and other deferred compensation	(b) Nontaxable benefits	(E) lotal of columns (B)(I)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
ANGELA RUGGIERO	Ξ		0	0		0	0	0	0
	3		0	0			0		0
	Ξ								
2	Ξ								
	Ξ								
ო	Ξ								
	Ξ								
4	Ξ								
	Ξ								
ر م	Ξ								
	Ξ								
y	Ξ								
	Ξ								
7	Ξ								
	Ξ								
8	(II)								
	Ξ								
6	Ξ								
	Ξ								
10	(II)								
	Ξ								
11	(E)								
	Ξ								
12	(II)								
	Ξ								
13	Ξ								
	Ξ								
14	Ξ								
	Ξ								
15	(11)								
	Ξ								
16	Ξ								
								Sche	Schedule J (Form 990) 2018